



# Indiana State Department of Health

**Indiana State Department of Health  
Immunization Division**

## **County Immunization Rate Assessment 2017**

**Immunization Division  
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## Data Dictionary

<b>CHIRP</b>	Children and Hoosiers Immunization Registry Program, also referred to as the “Indiana Immunization Registry”; the software application used by the Indiana State Department of Health Immunization Division for providers to report immunization data for patients. (Version 5.16.1.2)
<b>Registered in CHIRP</b>	A record exists for the patient, regardless of data contained within that record. Many records are imported through Vital Records data, established in 2005, and contain only the patient’s name and address, with no immunization data.
<b>Active Immunization Record</b>	A patient record that is marked as “active” in CHIRP, and contains two or more vaccinations, excluding influenza.
<b>CDC</b>	Centers for Disease Control and Prevention
<b>CoCASA</b>	Comprehensive Clinic Assessment Software Application, developed by the CDC for use in assessments. (Version 11.0)
<b>VTckS</b>	Vaccine Tracking System, maintained by the CDC for use in managing vaccine ordering.
<b>19-35 months of age</b>	Patients born between 04/30/2014 and 08/31/2015.
<b>4:3:1:3:3:1:4</b>	Vaccine series assessed for 19-35 months of age: 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 HepB, 1 Var, and 4 PCV.
<b>DTaP</b>	Vaccine to prevent diphtheria, tetanus, and acellular pertussis.
<b>Polio</b>	Vaccine to prevent poliomyelitis.
<b>MMR</b>	Vaccine to prevent measles, mumps, and rubella.
<b>Hib</b>	Vaccine to prevent Haemophilus influenzae type B.
<b>HepB</b>	Vaccine to prevent hepatitis B.
<b>Var</b>	Vaccine to prevent varicella (chicken pox).
<b>PCV</b>	Vaccine to prevent pneumococcal disease.
<b>Fully Insured</b>	A patient that has health insurance coverage that covers vaccine.
<b>VFC</b>	Vaccines for Children program, funded through the CDC that provides free vaccine for eligible children in the state of Indiana.
<b>VFC Provider</b>	An immunization provider who is enrolled in the VFC program, and therefore granted permission to order and administer vaccines covered under the VFC program to eligible persons.
<b>VFC Eligible</b>	A child age 0-18 is eligible to receive free vaccine under the VFC program if they are Medicaid eligible, uninsured, or have health insurance that does not cover vaccines. Also, any child who identifies as an American Indian or Alaskan Native, regardless of insurance status. (NOTE: Some of the children who are classified as “underinsured” can be funded with VFC vaccine at approved facilities*)
<b>Not VFC Eligible</b>	A child age 0-18 who has health insurance that covers vaccines or adults over the age of 18.

<b>Underinsured* (Insurance Does Not Cover Vaccines )</b>	Children who were recorded as “underinsured” by a provider in CHIRP. This should include children who have commercial (private) health insurance but the coverage does not include vaccines, children whose insurance covers only selected vaccines (these children are categorized as underinsured for non-covered vaccines only), or children whose insurance caps vaccine coverage at a certain amount (once that coverage amount is reached, these children are categorized as underinsured).
<b>Eligible for Publicly Funded Vaccines</b>	A child age 0-18 who is eligible for VFC vaccines, or any state-funded vaccines through 317 funds; those who are underinsured and receive non-VFC funded vaccine.
<b>Not Eligible for Publicly Funded Vaccines</b>	A child age 0-18 who is fully insured and therefore not eligible for any publicly funded vaccines or adults over the age of 18.
<b>Valid Dose</b>	A dose of vaccine that was given at the appropriate age and interval from any previous doses of vaccine according to manufacturer and ACIP guidelines.
<b>Invalid Dose</b>	A dose of vaccine that was not given at the appropriate age and interval from any previous doses of vaccine or at a minimum age. A patient is not considered to have immunity to the disease that the vaccine was for unless it was administered as a “valid dose”.

\*Please refer to the ISDH Immunization Division Eligibility Policy for a detailed definition of underinsured.

## Background

Each year, the Advisory Committee for Immunization Practices (ACIP) releases a recommended immunization schedule for childhood vaccination. These recommendations are supported by the Centers for Disease Control and Prevention (CDC). For each vaccine-preventable disease, there are particular rules and guidelines in the administration of the vaccine that, if followed, result in the optimal immune response in the patient. If these guidelines are not adhered to, in some cases, a child may be left unprotected. This can include scenarios where the child was administered a dose of vaccine incorrectly (invalid dose), or those who never receive the vaccine at all.

ACIP recommends children age 19 to 35 months to complete the 4:3:1:3:3:1:4 immunization series comprised of, at least four doses of diphtheria-tetanus-acellular pertussis (DTaP), at least three doses of polio, at least one dose of measles-mumps-rubella (MMR), at least three of Haemophilus influenzae B (Hib) depending on the brand used, at least three doses of hepatitis B, at least one dose of varicella antigens, and at least 4 doses of pneumococcal conjugate vaccine (PCV).

County level vaccination coverage estimates are important, both because public health issues often originate in small geographic areas and because certain public health actions are most effective at the local level. Previously in Indiana, it has not been possible to assess childhood vaccination series completion by county with the data available to the program. However with the use of the state immunization registry, Children and Hoosier Immunization Registry Program (CHIRP), more information is now available and a methodology has been developed for assessing children by county for completion of the complete ACIP recommended childhood immunization series (4:3:1:3:3:1:4).

It is increasingly important to measure children for completion of the entire series of childhood vaccines, rather than focusing on one antigen. In assessing the complete series, we can assist in improving immunization rates for at least 10 different vaccine-preventable diseases in

one measure. Improving the rate of completion for the entire series of childhood vaccines in those age 19-35 months can protect children from disease such as; diphtheria, pertussis, tetanus, polio, measles, mumps, rubella, varicella, pneumococcal disease, and *Haemophilus influenzae*.

Providing a measure of how well protected children are in specific communities assists immunization programs throughout the state to identify areas of greatest need, and allow targeting of resources. This may result in improving immunization rates in Indiana, which ultimately will help reduce the incidence of morbidity and mortality due to vaccine-preventable diseases.

## **Methods**

Immunization data by county was obtained by extracting raw data for the birth cohort from CHIRP. This data was filtered to include only those children who had an active immunization record, as defined by this assessment (see Data Dictionary). Additionally, access queries were used to correct any children's records that were missing a county, populating the county based on other fields, such as the city or zip code. When a child's city or zip code could not be used, the facility that administered the most recent vaccine was used to populate the county of residence for the child.

After completing this data "clean-up", the remaining children were assessed in CHIRP using a report that has been embedded in the application to measure the number of records complete for the 4:3:1:3:3:1:4 immunization series for each county. Data exported from CHIRP included the number of patients assessed defined as only those that had an active immunization record and were born within the birth cohort for the corresponding age range (19-35 months as of 3/31/2017). Exported data from CHIRP was then imported into a database and analyzed using a software program provided by the CDC, Comprehensive Clinic Assessment Software Application (CoCASA).

Immunizations were assessed for completion of series based on age range using an algorithm embedded in CoCASA for determining which patients had completed the series with

valid doses of each vaccine. The 19-35 month age range was assessed for completion of the 4:3:1:3:3:1:4 series as of 03/31/2017.

Assessment reports for each county were run using a template in CoCASA based on the imported data from CHIRP that contained the total number of patients assessed and the total number of patients complete for the corresponding vaccine series as of 03/31/2017.

Immunization rates by county were calculated by dividing the total number of patients that were complete for the series by the total number of patients assessed. The number of patients assessed includes only those that have an active immunization record and were born within the birth cohort for the corresponding age range.

Each county's cohort was assessed by VFC eligibility category, being either "VFC-Eligible", "Not VFC-Eligible", or "Underinsured" (see Data Dictionary for definitions of each category). Any child that was missing a VFC eligibility category code from CHIRP was included in the overall rate for the county, but was not included in a VFC eligibility category assessment.

The 4:3:1:3:3:1:4 immunization completion rate for the state of Indiana was calculated as a weighted average of the county rates, based on each county's cohort of children assessed (see Appendix C for a detailed standard operating procedure for conducting this assessment).

The total number of VFC providers by county (enrolled as April 27, 2017) was determined by exporting all provider data out of the Vaccine Tracking System (VTrckS), which is an application provided by CDC used to manage vaccine ordering and accountability.

### **Limitations**

Provider's participation in the use of CHIRP for reporting immunizations was mandated in Indiana as of July 1, 2015, which means all medical providers in the State of Indiana who are authorized to administer immunizations must submit complete information to CHIRP within seven business days of administering an immunization to any patient 18 years of age and younger. However we have been notified that all providers are not compliant with entering data into CHIRP for various reasons. The data analyzed from CHIRP are considered to be

representative of the entire state; however, the true number of immunizations administered in Indiana remains unknown. Nonetheless, this assessment showed that from 2016 to 2017 there was an approximate increase of 4,000 immunization records assessed. Increasing this factor will allow for better assessment of the number of immunizations administered in Indiana. See Table 3 for a detailed comparison between 2016 and 2017.

Many immunization providers in the state of Indiana use CHIRP to record their patient's immunization records. However, when a child transfers from one provider who uses CHIRP to another who does not use CHIRP, this child may appear to have an active immunization record that remains incomplete, even if the child did receive the remaining immunizations from the new provider. While this scenario contributes to the limitations of this analysis, the impact is thought to be minimal overall.

Upon breaking out the VFC eligibility categories among the cohort assessed, many were missing a VFC eligibility code from CHIRP. When missing, these children were still included in the county rate, but were not included in any eligibility category. Therefore, the rate among each VFC eligibility category is only representative of those children who had appropriate documentation of their VFC eligibility status in CHIRP at the time of the most recent vaccination. In the secondary methodology used, any child with a missing VFC eligibility code was included in the analysis for "Not Eligible for Publicly Funded Vaccines" category.

In the most recent NIS (National Immunization Survey) data from 2015, the overall immunization rate for the 4:3:1:3:3:1:4 series completion is  $74.7\% \pm 7.0$  among 19-35 month old children. The birth cohort for this data is January 2012 through May 2014. This estimate is higher than that provided in this report for Indiana, 63%. The methodology used to generate the data contained in this report differs greatly from that used for the NIS determination of the immunization rate. NIS uses a random digit dialing survey, and contains a total sample size of approximately 400 surveys. Subjects are only selected to be included in the survey if they permit the surveyor to obtain medical records and information to verify the survey responses. This

presents a selection bias, as many individuals who are not up to date with vaccinations may refuse to give permission, as these records would then be excluded from the analysis.

Additionally, any child whose immunization history cannot be verified is excluded from the analysis.

## Results

The full results of this assessment can be found in the data table in Appendix A. A comparison between 2016 and 2017 immunization completion rates by county, number assessed and population represented can be found in Appendix B. Table 1 below summarizes the state average, weighted by county population assessed and lists the 10 counties with lowest rates. A summary of the number of VFC providers by county is also provided. Table 2 below displays the state average with the counties with the 10 highest rates. A summary of the number of VFC providers by county is also provided. Table 3 below summarizes 2016 and 2017 Indiana assessment overall.

**Table 1: Ten Lowest Rates by County**

<b>COUNTY</b>	<b>COMPLETION RATE FOR 4:3:1:3:3:1:4</b>	<b>NUMBER OF VFC PROVIDERS ENROLLED</b>
<b>~INDIANA</b>	<b>63%</b>	<b>778</b>
DAVISS	45.7%	9
LAGRANGE	47.1%	7
GRANT	49.5%	8
ST JOSPEPH	50.5%	40
LAKE	53.4%	57
WELLS	53.6%	2
JACKSON	55.5%	3
ALLEN	55.8%	26
ELKHART	57.6%	33
CRAWFORD	58.1%	2

**Table 2: Ten Highest Rates by County**

<b>COUNTY</b>	<b>COMPLETION RATE FOR 4:3:1:3:3:1:4</b>	<b>NUMBER OF VFC PROVIDERS ENROLLED</b>
<b>INDIANA</b>	<b>63%</b>	<b>778</b>
SPENCER	83.3%	2
PIKE	79.5%	3
GREENE	79.0%	4
MONROE	79.0%	5
CASS	78.5%	4
PERRY	78.2%	2
HENRY	78.1%	6
DECATUR	77.8%	7
OWEN	77.8%	3
WARRICK	77.4%	7

**Table 3: Summary 2016 and 2017 Indiana Assessment**

	<b>2016</b>	<b>2017</b>
<b>Indiana completion rate for 4:3:1:3:3:1:4 series</b>	60%	63%
<b>Number assessed 19-35 months of age</b>	107,157	111,137
<b>Percentage of population represented</b>	85.3%	88.4%
<b>Number of VFC Providers</b>	780	778
<b>Number/ rate assessed by Not VFC-Eligible</b>	44,495/ 64%	43,763/ 68%
<b>Number/ rate assessed by Underinsured</b>	726/ 62%	646/ 64%
<b>Number/ rate assessed by VFC-Eligible</b>	51,901/ 60%	55,174/ 62%

The average immunization rate in Indiana counties is 63%, and the median (or midpoint) is 67%. There 60 were out of 92 counties that fell above the average of 63%, 4 that were equal to the average, and 28 that were below the average of 63%.

## **Discussion**

The result for Indiana's immunization rate for 2017 is 63% coverage among children age 19-35 months which increased 3% relative to the 2016 rate of 60%. The increase in the number of children assessed and the percent of population represented could account for the increase in the overall rate.

According to 2015 US Census data by age, Indiana's population of 19-35 month old children should be approximately 125,686. After excluding any immunization records that were not considered to be "active", there were only 111,137 records assessed in this analysis. This represents 88.4% of the estimated population. The percentage of the population represented in Clay, Hancock, Jefferson, Martin, Morgan, Ohio, Pike, and Warren counties all exceed 100%. This is thought to be attributable to an increase in children age 19-35 months whom relocated to these counties after 2015 as well as the two year difference between the census data and the data extracted from CHIRP for analysis of the rates.

## **Recommendations**

Achieving high vaccination rates is attainable and progress among the 19-35 months age group series completion, has been seen among many counties. Additional efforts are needed to ensure that health-care providers administer recommended vaccinations and use each visit as an opportunity to ensure each child is fully vaccinated on time with every recommended vaccine. Also, rather than targeting efforts towards children already past due, health departments need to implement targeted provider education to confirm kids are vaccinated before they fall within 19-35 months of age. Reducing the number of missed opportunities, and vaccinating at the 15 month appointment would greatly improve vaccination rates as well as number of children who are behind.

## **Conclusions**

The results of this analysis demonstrate the need for further investigation into identifying contributing factors which might explain why children are not completing the childhood vaccination series by 19 months of age. Further details of each county's data should be assessed on a case by case basis to find pockets of need.

It can be observed that the counties with the highest immunization rates also have some of the lowest numbers of VFC providers in the county. One reason for this may be that a fewer number of providers have more control over maintaining patient records and performing activities to increase the number of children who complete the immunization series. It should be noted, however, that there may be many disadvantages to limiting immunization services to few providers in an isolated area as this could create potential barriers to accessing healthcare.

Evidence-based approaches to increasing immunization should be utilized, such as targeting populations in need, and reminder-recall activities, which prompt the guardians of children missing immunizations to contact their medical providers.

**APPENDIX A: 2017 Data Summary. Completion rate of 4:3:1:3:3:1:4 immunization series among children 19-35 month with an active immunization record in CHIRP**

COUNTY	NUMBER OF VFC PROVIDERS ENROLLED	2015 (Census) POPULATION 19-35 MONTHS OF AGE	NUMBER ASSESSED 19-35 MONTHS OF AGE	PERCENTAGE OF POPULATION REPRESENTED	COMPLETION RATE FOR 4:3:1:3:3:1:4	NUMBER NOT VFC ELIGIBLE	RATE AMONG NOT VFC-ELIGIBLE	NUMBER UNDERINSURED	RATE AMONG UNDERINSURED	NUMBER VFC-ELIGIBLE	RATE AMONG VFC-ELIGIBLE
~INDIANA	778	125,686	111,137	88%	63%	43,763	68%	646	64%	55,174	62%
ADAMS	4	1,015	662	65%	58%	196	70%	6	67%	408	53%
ALLEN	26	7,857	6,889	88%	56%	2,175	63%	78	55%	3,322	55%
BARTHOLOMEW	8	1,599	1,442	90%	75%	590	75%	2	100%	413	76%
BENTON	1	175	133	76%	69%	32	63%	4	50%	62	65%
BLACKFORD	2	236	199	84%	64%	39	59%	0	0%	132	69%
BOONE	8	1,237	1,214	98%	71%	816	71%	13	77%	235	79%
BROWN	2	193	171	89%	71%	80	75%	0	0%	77	65%
CARROLL	3	307	274	89%	72%	95	78%	2	100%	117	69%
CASS	4	731	610	83%	79%	183	78%	5	100%	356	82%
CLARK	10	2,213	1,971	89%	59%	795	64%	2	0%	935	61%
CLAY	5	465	480	103%	70%	206	80%	3	33%	260	64%
CLINTON	4	675	647	96%	70%	237	78%	4	100%	288	63%
CRAWFORD	2	145	117	81%	58%	31	61%	1	100%	69	61%
DAVISS	9	801	621	78%	46%	146	68%	13	38%	424	39%
DEARBORN	9	768	583	76%	63%	261	75%	2	100%	212	67%
DECATUR	7	517	442	85%	78%	187	86%	9	89%	214	73%
DEKALB	9	765	715	93%	68%	305	71%	7	86%	344	66%
DELAWARE	12	1,871	1,585	85%	66%	396	60%	3	67%	903	69%
DUBOIS	4	833	737	88%	72%	349	78%	30	67%	267	68%
ELKHART	33	4,530	3,947	87%	58%	1,559	60%	19	63%	2,250	58%
FAYETTE	4	391	311	80%	67%	61	82%	14	50%	218	66%
FLOYD	8	1,313	1,181	90%	59%	529	65%	4	0%	529	56%
FOUNTAIN	2	311	267	86%	66%	80	79%	5	60%	134	57%
FRANKLIN	2	392	215	55%	68%	95	78%	1	0%	110	64%
FULTON	2	377	322	85%	66%	111	78%	15	67%	175	61%
GIBSON	7	629	552	88%	75%	319	81%	1	0%	226	68%

COUNTY	NUMBER OF VFC PROVIDERS ENROLLED	2015 (Census) POPULATION 19-35 MONTHS OF AGE	NUMBER ASSESSED 19-35 MONTHS OF AGE	PERCENTAGE OF POPULATION REPRESENTED	COMPLETION RATE FOR 4:3:1:3:3:1:4	NUMBER NOT VFC ELIGIBLE	RATE AMONG NOT VFC-ELIGIBLE	NUMBER UNDERINSURED	RATE AMONG UNDERINSURED	NUMBER VFC-ELIGIBLE	RATE AMONG VFC-ELIGIBLE
GRANT	8	1,163	1,000	86%	50%	248	61%	12	75%	650	47%
GREENE	4	493	429	87%	79%	185	86%	5	80%	232	74%
HAMILTON	21	6,107	5,566	91%	60%	4,240	59%	18	72%	804	68%
HANCOCK	8	1,161	1,276	110%	61%	653	62%	6	83%	297	68%
HARRISON	5	645	615	95%	60%	288	62%	0	0%	251	61%
HENDRICKS	10	2,719	2,700	99%	59%	952	67%	6	83%	602	69%
HENRY	6	760	645	85%	78%	219	86%	3	100%	366	77%
HOWARD	9	1,529	1,323	87%	70%	498	75%	11	64%	654	71%
HUNTINGTON	5	643	594	92%	59%	241	60%	8	88%	289	64%
JACKSON	3	991	840	85%	55%	277	56%	3	33%	398	62%
JASPER	2	572	510	89%	65%	232	72%	11	100%	225	58%
JAY	4	438	382	87%	73%	133	75%	5	60%	218	73%
JEFFERSON	3	500	529	106%	72%	184	74%	2	100%	288	72%
JENNINGS	2	530	435	82%	67%	151	66%	0	0%	211	69%
JOHNSON	21	2,821	2,658	94%	65%	1,398	66%	11	55%	1,007	66%
KNOX	3	722	603	84%	66%	246	77%	8	63%	345	59%
KOSCIUSKO	7	1,560	1,316	84%	61%	535	68%	8	38%	606	60%
LAGRANGE	7	1,151	613	53%	47%	149	70%	3	67%	443	40%
LAKE	57	9,113	7,807	86%	53%	2,710	62%	42	57%	4,614	50%
LAPORTE	11	1,983	1,878	95%	58%	689	68%	3	67%	1,165	53%
LAWRENCE	7	759	675	89%	75%	279	78%	2	100%	390	73%
MADISON	22	2,190	1,982	91%	71%	729	73%	8	63%	1,152	72%
MARION	112	21,149	18,808	89%	63%	5,513	62%	40	70%	11,862	65%
MARSHALL	12	850	736	87%	59%	286	64%	8	63%	415	58%
MARTIN	1	196	208	106%	58%	51	69%	9	78%	136	54%
MIAMI	3	526	455	87%	68%	121	75%	10	90%	286	68%
MONROE	5	1,909	1,775	93%	79%	998	85%	3	100%	767	72%
MONTGOMERY	7	736	618	84%	69%	206	77%	8	50%	315	65%

COUNTY	NUMBER OF VFC PROVIDERS ENROLLED	2015 (Census) POPULATION 19-35 MONTHS OF AGE	NUMBER ASSESSED 19-35 MONTHS OF AGE	PERCENTAGE OF POPULATION REPRESENTED	COMPLETION RATE FOR 4:3:1:3:1:4	NUMBER NOT VFC ELIGIBLE	RATE AMONG NOT VFC-ELIGIBLE	NUMBER UNDERINSURED	RATE AMONG UNDERINSURED	NUMBER VFC-ELIGIBLE	RATE AMONG VFC-ELIGIBLE
MORGAN	8	1,133	1,194	105%	71%	509	74%	1	100%	581	69%
NEWTON	1	192	175	91%	61%	58	71%	5	40%	97	55%
NOBLE	3	908	825	91%	70%	351	79%	13	77%	408	65%
OHIO	2	84	109	130%	63%	35	89%	0	0%	48	63%
ORANGE	5	360	304	84%	65%	94	76%	3	67%	172	64%
OWEN	3	301	261	87%	78%	94	86%	1	100%	162	74%
PARKE	3	317	205	65%	62%	74	68%	1	0%	119	59%
PERRY	2	303	234	77%	78%	120	79%	3	100%	108	77%
PIKE	3	211	215	102%	80%	110	88%	4	50%	93	72%
PORTER	12	2,718	2,377	87%	65%	1,384	70%	9	44%	919	60%
POSEY	5	429	388	90%	76%	260	81%	2	100%	121	66%
PULASKI	2	230	199	87%	69%	67	73%	3	100%	121	65%
PUTNAM	5	566	458	81%	63%	108	75%	1	0%	207	64%
RANDOLPH	3	445	412	93%	67%	170	68%	1	0%	205	68%
RIPLEY	4	520	396	76%	76%	199	85%	0	0%	170	70%
RUSH	6	272	262	96%	68%	72	71%	1	100%	129	70%
SCOTT	4	428	365	85%	65%	112	71%	5	100%	230	61%
SHELBY	3	756	726	96%	77%	143	70%	7	57%	429	81%
SPENCER	2	334	234	70%	83%	127	87%	7	71%	85	85%
STARKE	7	376	348	93%	61%	127	67%	0	0%	208	59%
STEUBEN	2	548	498	91%	58%	189	74%	2	50%	288	49%
STJOSEPH	40	5,269	4,597	87%	50%	1,828	54%	22	36%	2,375	53%
SULLIVAN	4	334	307	92%	70%	163	74%	3	67%	136	65%
SWITZERLAND	1	195	112	57%	67%	36	69%	0	0%	56	80%
TIPPECANOE	16	3,428	3,291	96%	73%	819	79%	16	75%	1,425	71%
TIPTON	1	192	171	89%	71%	89	74%	5	80%	43	77%
UNION	1	88	67	76%	64%	9	78%	0	0%	54	67%
VANDEBURGH	22	3,438	2,948	86%	74%	1,490	79%	6	50%	1,395	69%

COUNTY	NUMBER OF VFC PROVIDERS ENROLLED	2015 (Census) POPULATION 19-35 MONTHS OF AGE	NUMBER ASSESSED 19-35 MONTHS OF AGE	PERCENTAGE OF POPULATION REPRESENTED	COMPLETION RATE FOR 4:3:1:3:3:1:4	NUMBER NOT VFC ELIGIBLE	RATE AMONG NOT VFC-ELIGIBLE	NUMBER UNDERINSURED	RATE AMONG UNDERINSURED	NUMBER VFC-ELIGIBLE	RATE AMONG VFC-ELIGIBLE
VERMILLION	4	263	221	84%	69%	92	73%	0	0%	128	67%
VIGO	19	1,899	1,649	87%	65%	668	70%	4	25%	932	63%
WABASH	3	495	428	86%	59%	175	63%	3	33%	209	61%
WARREN	2	131	134	102%	72%	43	70%	1	100%	56	66%
WARRICK	7	1,020	1,004	98%	77%	691	80%	4	100%	297	72%
WASHINGTON	4	503	387	77%	62%	153	65%	2	100%	205	61%
WAYNE	5	1,194	985	82%	73%	264	76%	2	0%	662	75%
WELLS	2	536	440	82%	54%	188	53%	6	50%	199	59%
WHITE	5	449	399	89%	69%	97	87%	4	50%	230	65%
WHITLEY	5	559	549	98%	66%	271	69%	3	100%	204	67%

**APPENDIX B. Immunization series completion rate for 4:3:1:3:3:1:4 among children aged 19-35 months, by county, number assessed, population represented, 2016 & 2017**

COUNTY	(2015 Census) POPULATION 19-35 MONTHS OF AGE	Number Assessed 19-35 Months of Age		Percentage of Population Represented		Completion Rate for 4:3:1:3:3:1:4	
		2,017	2,016	2017	2016	2017	2016
-INDIANA	125,686	111,137	107,157	88%	85%	63%	60%
ADAMS	1,015	662	647	65%	64%	58%	56%
ALLEN	7,857	6,889	6,626	88%	84%	56%	56%
BARTHOLOMEW	1,599	1,442	1,437	90%	90%	75%	73%
BENTON	175	133	131	76%	75%	69%	68%
BLACKFORD	236	199	186	84%	79%	64%	62%
BOONE	1,237	1,214	1,126	98%	91%	71%	75%
BROWN	193	171	165	89%	85%	71%	69%
CARROLL	307	274	289	89%	94%	72%	71%
CASS	731	610	595	83%	81%	79%	79%
CLARK	2,213	1,971	1,902	89%	86%	59%	52%
CLAY	465	480	477	103%	103%	70%	68%
CLINTON	675	647	589	96%	87%	70%	66%
CRAWFORD	145	117	115	81%	79%	58%	57%
DAVISS	801	621	649	78%	81%	46%	47%
DEARBORN	768	583	556	76%	72%	63%	55%
DECATUR	517	442	441	85%	85%	78%	73%
DEKALB	765	715	641	93%	84%	68%	62%
DELAWARE	1,871	1,585	1,608	85%	86%	66%	64%
DUBOIS	833	737	713	88%	86%	72%	68%
ELKHART	4,530	3,947	3,712	87%	82%	58%	49%
FAYETTE	391	311	301	80%	77%	67%	70%
FLOYD	1,313	1,181	1,173	90%	89%	59%	56%
FOUNTAIN	311	267	275	86%	88%	66%	60%

COUNTY	(2015 Census) POPULATION 19-35 MONTHS OF AGE	Number Assessed 19-35 Months of Age		Percentage of Population Represented		Completion Rate for 4:3:1:3:3:1:4	
		2,017	2,016	2017	2016	2017	2016
FRANKLIN	392	215	211	55%	54%	68%	70%
FULTON	377	322	338	85%	90%	66%	64%
GIBSON	629	552	548	88%	87%	75%	73%
GRANT	1,163	1,000	1,025	86%	88%	50%	48%
GREENE	493	429	374	87%	76%	79%	71%
HAMILTON	6,107	5,566	5,117	91%	84%	60%	57%
HANCOCK	1,161	1,276	1,143	110%	98%	61%	48%
HARRISON	645	615	554	95%	86%	60%	56%
HENDRICKS	2,719	2,700	2,722	99%	100%	59%	54%
HENRY	760	645	643	85%	85%	78%	73%
HOWARD	1,529	1,323	1,293	87%	85%	70%	70%
HUNTINGTON	643	594	558	92%	87%	59%	61%
JACKSON	991	840	752	85%	76%	55%	62%
JASPER	572	510	499	89%	87%	65%	67%
JAY	438	382	353	87%	81%	73%	68%
JEFFERSON	500	529	496	106%	99%	72%	68%
JENNINGS	530	435	449	82%	85%	67%	71%
JOHNSON	2,821	2,658	2,599	94%	92%	65%	61%
KNOX	722	603	633	84%	88%	66%	77%
KOSCIUSKO	1,560	1,316	1,217	84%	78%	61%	59%
LAGRANGE	1,151	613	621	53%	54%	47%	46%
LAKE	9,113	7,807	7,748	86%	85%	53%	52%
LAPORTE	1,983	1,878	1,808	95%	91%	58%	58%
LAWRENCE	759	675	613	89%	81%	75%	80%
MADISON	2,190	1,982	1,933	91%	88%	71%	66%
MARION	21,149	18,808	17,895	89%	85%	63%	60%
MARSHALL	850	736	682	87%	80%	59%	49%

COUNTY	(2015 Census) POPULATION 19-35 MONTHS OF AGE	Number Assessed 19-35 Months of Age		Percentage of Population Represented		Completion Rate for 4:3:1:3:3:1:4	
		2,017	2,016	2017	2016	2017	2016
MARTIN	196	208	215	106%	110%	58%	60%
MIAMI	526	455	498	87%	95%	68%	71%
MONROE	1,909	1,775	1,651	93%	86%	79%	76%
MONTGOMERY	736	618	600	84%	82%	69%	69%
MORGAN	1,133	1,194	1,140	105%	101%	71%	70%
NEWTON	192	175	166	91%	86%	61%	65%
NOBLE	908	825	794	91%	87%	70%	66%
OHIO	84	109	109	130%	130%	63%	54%
ORANGE	360	304	342	84%	95%	65%	63%
OWEN	301	261	239	87%	79%	78%	73%
PARKE	317	205	189	65%	60%	62%	61%
PERRY	303	234	206	77%	68%	78%	72%
PIKE	211	215	232	102%	110%	80%	76%
PORTER	2,718	2,377	2,436	87%	90%	65%	63%
POSEY	429	388	355	90%	83%	76%	70%
PULASKI	230	199	206	87%	90%	69%	62%
PUTNAM	566	458	475	81%	84%	63%	60%
RANDOLPH	445	412	393	93%	88%	67%	62%
RIPLEY	520	396	400	76%	77%	76%	71%
RUSH	272	262	237	96%	87%	68%	65%
SCOTT	428	365	347	85%	81%	65%	56%
SHELBY	756	726	707	96%	94%	77%	74%
SPENCER	334	234	228	70%	68%	83%	75%
STARKE	376	348	310	93%	82%	61%	54%
STEUBEN	548	498	480	91%	88%	58%	56%
STJOSEPH	5,269	4,597	4,386	87%	83%	50%	42%
SULLIVAN	334	307	301	92%	90%	70%	57%

COUNTY	(2015 Census) POPULATION 19-35 MONTHS OF AGE	Number Assessed 19-35 Months of Age		Percentage of Population Represented		Completion Rate for 4:3:1:3:3:1:4	
		2,017	2,016	2017	2016	2017	2016
SWITZERLAND	195	112	121	57%	62%	67%	57%
TIPPECANOE	3,428	3,291	3,045	96%	89%	73%	73%
TIPTON	192	171	192	89%	100%	71%	59%
UNION	88	67	48	76%	55%	64%	75%
VANDERBURGH	3,438	2,948	2,886	86%	84%	74%	71%
VERMILLION	263	221	206	84%	78%	69%	66%
VIGO	1,899	1,649	1,631	87%	86%	65%	58%
WABASH	495	428	441	86%	89%	59%	55%
WARREN	131	134	149	102%	114%	72%	72%
WARRICK	1,020	1,004	945	98%	93%	77%	71%
WASHINGTON	503	387	362	77%	72%	62%	62%
WAYNE	1,194	985	953	82%	80%	73%	71%
WELLS	536	440	440	82%	82%	54%	50%
WHITE	449	399	397	89%	88%	69%	77%
WHITLEY	559	549	521	98%	93%	66%	70%

## APPENDIX C: Standard Operating Procedure (SOP) for Performing County Rate Assessment

1. Create and save a 'CoCASA Export File' from CHIRP for each county.
  - a. Login to CHIRP, click "CASA Export" from the left sidebar.
  - b. Enter the patient date of birth range.
  - c. Select the county.
  - d. Leave all other settings at their default state, and click "Create Export File".
    - i. The default settings should be:
      1. CoCASA Version: CoCASA v2.1 and up,
      2. Export by: CPT code,
      3. Output Type: Text File (Download)
  - e. After export file has generated, save the file named for the county exported.

Figure 1

**Export to CASA**

Patient Status:  Active Only  Inactive Only  All

Patient Birth Date Range: **From:** 04/30/2012 **Through:** 08/31/2013

**Limit Export by**

Organization (IRMS) --select--

Facility --select--

Facility Group --select--

Do Not Limit

VFC PIN --select--

Primary Care Physician --select--

Vaccinator --select--

Program --select--

Health Plan --select--

County/Parish ADAMS

Zip Code

District/Region

CASA Version:  CoCASA v1.3 - v2  CoCASA v2.1 and up

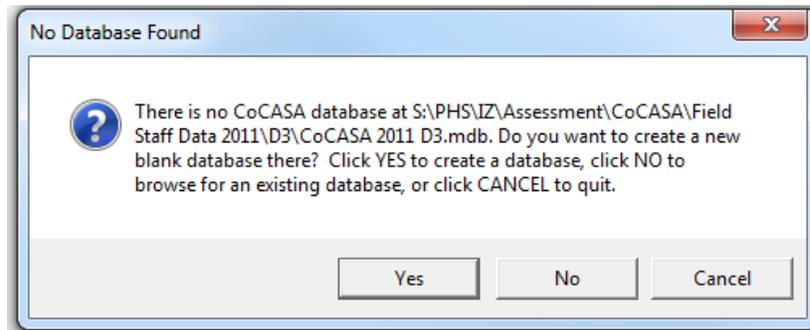
Export by:  CPT Code  CVX Code

Output Type:  Text File (Download)  Text File (Server Job)  HTML (Text Area)

Clear Create Export File View Export Log

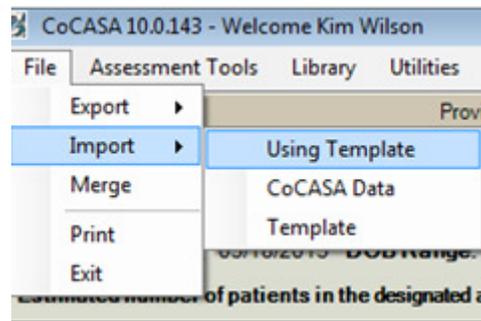
2. Import each export file into a new, blank CoCASA database.
  - a. Rename an existing CoCASA database. Then, open CoCASA. A message will appear as shown below:

**Figure 2**



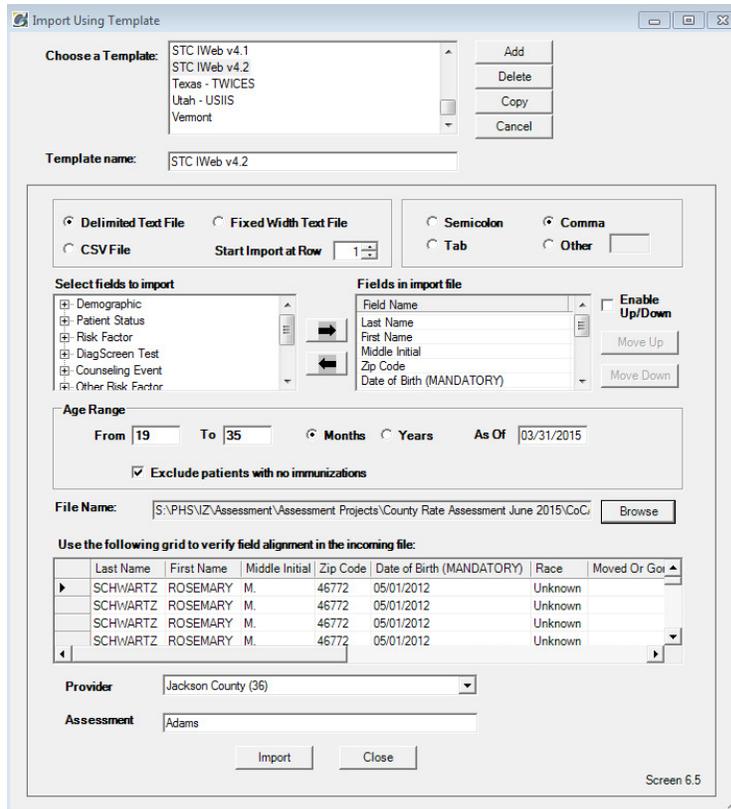
- b. Click “Yes” on the dialog box to create a new blank database. Name the new database for the assessment it is being created for.
- c. Open CoCASA, directing it toward the new database created for the assessment.
- d. Set up a provider named “County Rate Assessment” with the address and phone number for ISDH.
- e. Click on File, Import, Using Template.

**Figure 3**



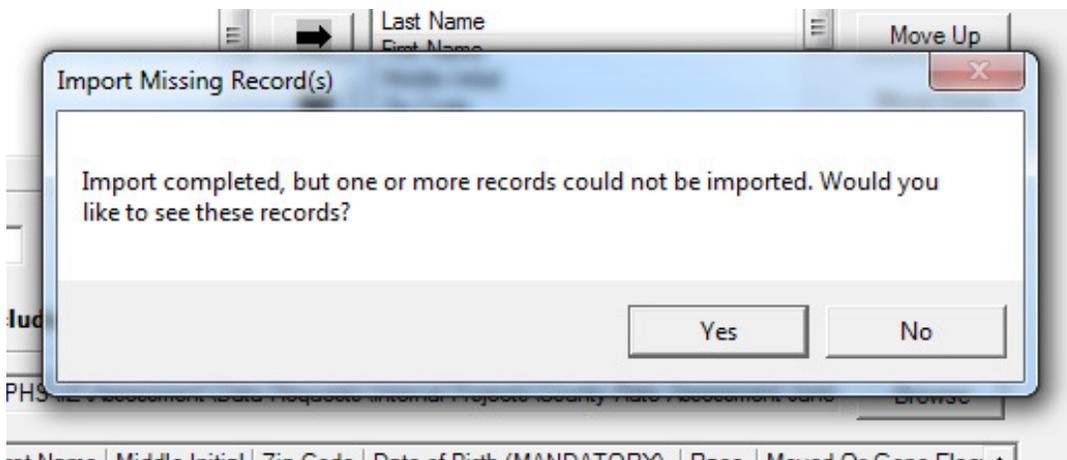
- f. Choose the template to import from, STC IWeb v4.2.
- g. Enter the date of birth range for the cohort, including the “as of” date, indicating what age the subjects should be at the time of assessment.
- h. Click on “Exclude patients with no immunizations”.
- i. Click “Browse” and select the file saved for the county being imported.
- j. Choose the provider “County Rate Assessment”, and enter the county name for “Assessment”.
- k. Click “Import”.

Figure 4



1. After the records have finished importing, if there was at least one record excluded, the following message will display:

Figure 4



- m. Click Yes, then save the text file for later reference. This can be used in working with CHIRP staff to “clean up” the data.
  - n. Complete all steps for each county in the state.
3. Make a copy of the complete database after importing all county export files.
4. Open the Access database that contains the county assessment data.
  - a. Double click the file in Windows Explorer.

- b. Upon opening, you will be prompted to enter a password, enter “COCASAnip”. This is case-sensitive.
5. Exclude patients from the patient table that do not have 2 or more vaccines excluding influenza.
  - a. First, run a query to create a new “tblDoses” table containing all doses excluding influenza. (copy and paste the SQL script shown in Figure 6)
    - i. The vaccine code for the influenza family is “11”.
    - ii. Run the query, naming the table “tblDosesNoFlu”.

**Figure 6**

```
SELECT tblDoses.AntigenID, tblDoses.DateGiven, tblDoses.DoseNumber, tblDoses.Location,
tblDoses.LotNumber, tblDoses.ManufacturerID, tblDoses.PatientID, tblDoses.TradeNameID INTO
tblDosesNoFlu
FROM tblDoses
GROUP BY tblDoses.AntigenID, tblDoses.DateGiven, tblDoses.DoseNumber, tblDoses.Location,
tblDoses.LotNumber, tblDoses.ManufacturerID, tblDoses.PatientID, tblDoses.TradeNameID
HAVING (((tblDoses.AntigenID) Not Like "11"));
```

- b. Next, run another query to create a new “tblDoses” table containing all doses excluding those for patients with fewer than 2 vaccines (excluding flu). (copy and paste the SQL script shown in Figure 7)
  - c. Run the query, naming the table “tblDosesNoFlu2ormore”

NOTE: THIS QUERY WILL TAKE APPROXIMATELY 48 HOURS TO RUN

**Figure 7**

```
SELECT tblDosesNoFlu.AntigenID, tblDosesNoFlu.DateGiven, tblDosesNoFlu.DoseNumber,
tblDosesNoFlu.Location, tblDosesNoFlu.LotNumber, tblDosesNoFlu.ManufacturerID,
tblDosesNoFlu.PatientID, tblDosesNoFlu.TradeNameID INTO tblDosesNoFlu2ormore
FROM tblDosesNoFlu
GROUP BY tblDosesNoFlu.AntigenID, tblDosesNoFlu.DateGiven, tblDosesNoFlu.DoseNumber,
tblDosesNoFlu.Location, tblDosesNoFlu.LotNumber, tblDosesNoFlu.ManufacturerID,
tblDosesNoFlu.PatientID, tblDosesNoFlu.TradeNameID
HAVING (((tblDosesNoFlu.PatientID) In (SELECT [PatientID] FROM [tblDoses] As Tmp GROUP
BY [PatientID] HAVING Count(*)>1 )));
```

- d. Now create a new table for unique patient IDs contained in the “tblDosesNoFlu2ormore” table.
    - i. Copy and paste the SQL script shown in Figure 8.
    - ii. Run the query, naming the table “tblUniquePatients”

**Figure 8**

```
SELECT DISTINCTROW tblDosesNoFlu2ormore.PatientID INTO tblUniquePatients
FROM tblDosesNoFlu2ormore
GROUP BY tblDosesNoFlu2ormore.PatientID;
```

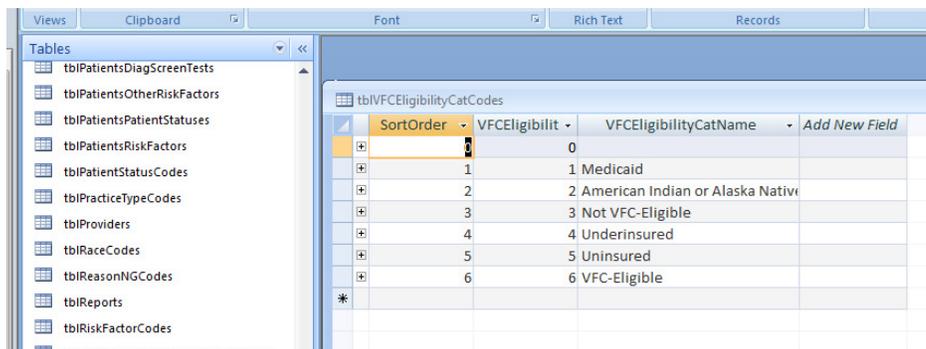
- e. Finally, run a delete query to delete the patient records from the “tblPatients” table that are not contained in the unique patients table.
  - i. Copy and paste the SQL script shown in Figure 9.
  - ii. Run the query, this will update the “tblPatients” table by deleting those not contained in tblUniquePatients.

**Figure 9**

```
DELETE Delete AS Expr1, tblPatients.[PatientID]
FROM tblPatients
WHERE (((tblPatients.[PatientID]) Not In (Select PatientID from tblUniquePatients)));
```

- 6. Create a variable for “VFC-Eligible” in the “tblVFCEligibilityCatCodes” table
  - a. Click underneath the record for 5-Uninsured to create a new record
  - b. Enter 6 for Sort Order, 6 for VFCEligibilityCatID, and “VFC-Eligible” under VFCEligibilityCatName. (see Figure 10)

**Figure 10**

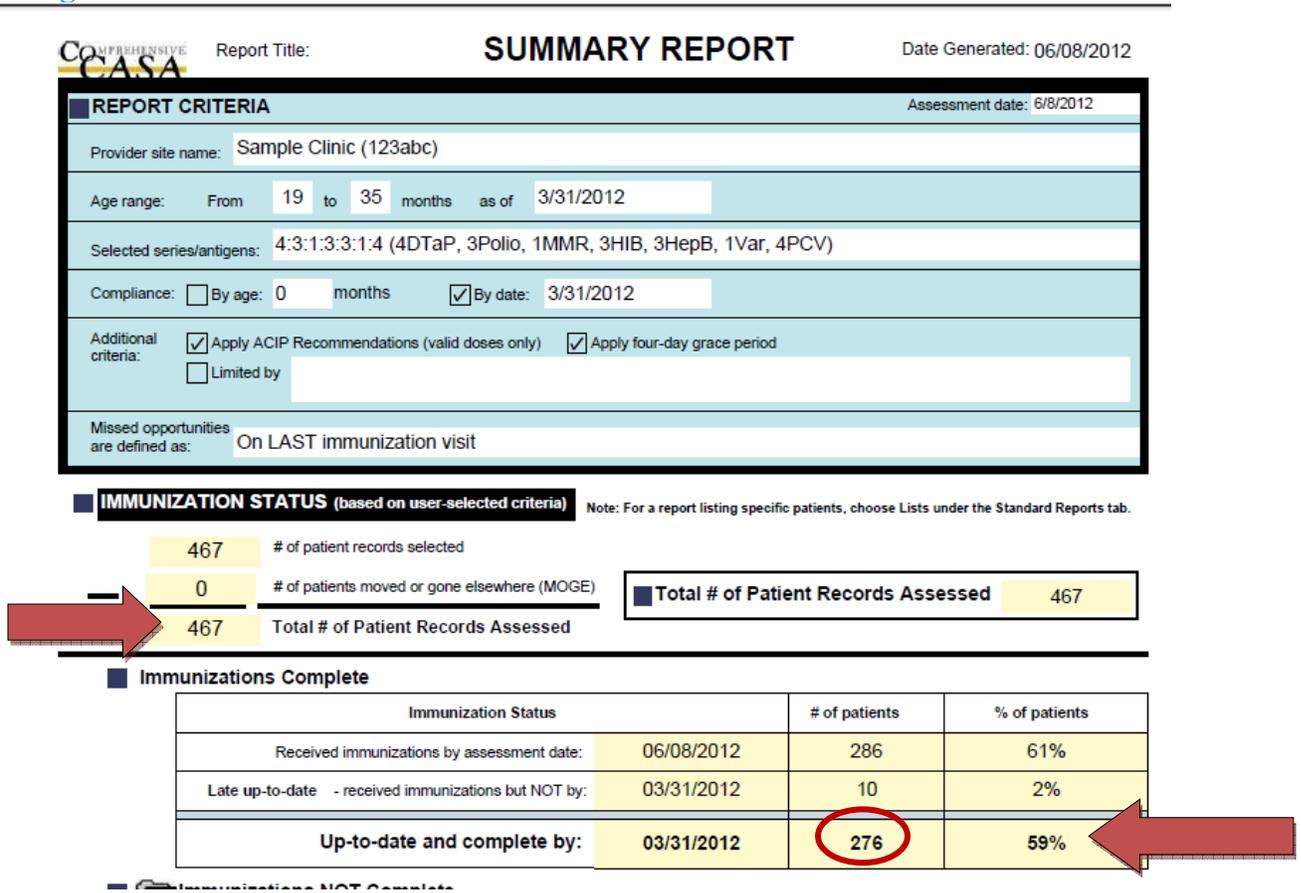


SortOrder	VFCEligibilit	VFCEligibilityCatName	Add New Field
0			
1	1	Medicaid	
2	2	American Indian or Alaska Native	
3	3	Not VFC-Eligible	
4	4	Underinsured	
5	5	Uninsured	
6	6	VFC-Eligible	
*			

- 7. Update patient eligibility codes in the “tblPatientsPatientStatuses” to VFC-Eligible for all relevant categories.
  - a. Find all values in the “VFCEligibilityCatID” field that are “1”, “2”, or “5” and replace with “6”. This will put all VFC-Eligible categories into one category.
  - b. Be sure to save the database after making these changes, then close it.
- 8. Open CoCASA and begin running a “Summary Report” (see Figure 11) for each county, for each VFC eligibility category to be assessed.
  - a. Click on the “Reports” tab. Select the assessment to run the report for; these should be named for the county the data came from.
  - b. Select “Summary Report” from the left sidebar, then enter the report criteria.
    - i. Age Range: 19-35 Months as of 03/31/2017
    - ii. Antigens-Series: 4:3:1:3:3:1:4
    - iii. Compliance: by date: 03/31/2017

- iv. Limit by a user-selected variable: after checking this box, click the button to open up the choices of variables. Choose the VFC Eligibility category you are running the report for.
  - v. Click “Run Report”. When report is complete, click on “Export” and save the report.
- c. In most cases, you will run 4 different reports for each county. One without choosing the user selected variable (to capture all children), one with “VFC-Eligible” as a choice, one with “Not VFC-Eligible”, and one with “Underinsured”.
9. Use the data provided on the county reports to manually populate a spreadsheet of values for each county (shown in Figure 11). Key fields to include are:
- a. Number of children included in the assessment
  - b. Number of children who were up to date
  - c. Percentage of children who are up to date
10. These fields should be populated for each eligibility category assessed.

Figure 11



## References

Centers for Disease Control and Prevention. National Immunization Survey, NIS. Estimated for Completion of 4:3:1:3:3:1:4, complete for Hib series. Retrieved May 23, 2017.

[https://www.cdc.gov/mmwr/volumes/65/wr/mm6539a4.htm?s\\_cid=mm6539a4\\_w](https://www.cdc.gov/mmwr/volumes/65/wr/mm6539a4.htm?s_cid=mm6539a4_w)

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Centers for Disease Control and Prevention (CDC) Comprehensive Clinic Assessment Software Application (CoCASA), Version 12.0

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